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Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : HUBCO

Account Number : 104662003400

Phone : (516)935-3940

Fax Number : (516) 935-3088

FLORIDA PROFIT/NON PROFIT CORPORATION

Omni Kleen Group, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
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Corporate Filing Menu

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Omni Kleen Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Omni Kleen Group, Inc. 3011 N. Stewart Street Kissimmee, FL 34746 06 SEP -8 AH IO: 08
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ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Tracy Evans 3011 N. Stewart Street Kissimmee, FL 34746

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Kevyn Lloyd- 411 Oakpoint Circle, Davenport, FL 33837-President/Director Tracy Evans- 3011 N. Stewart Street, Kissimmee, FL 34746- Vice President/Director

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Kevyn Lloyd- 411 Oakpoint Circle, Davenport, FL 33837 Tracy Evans- 3011 N. Stewart Street, Kissimmee, FL 34746

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

30th	_day of	May	2006.	

Kevyn Lloyd-Signature

Tracy Evans - Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: _	Omni Kleen Group, Inc.			
2. The name and address of the registere	ed agent and office is:			
	Tracy Evans	TA'S	0	
	Name	- LLAI	38 90	
	3011 N. Stewart Street	200 A A A A A A A A A A A A A A A A A A	- u	<u> </u>
	(P.O. Box or Mail Drop Box NOT Acceptable)		ထ	· • • • • • • • • • • • • • • • • • • •
	Kissimmee, FL 34746	يسم و آو د د د پيسان		ED
	(City / State / Zip)	- STATE	0:09	:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Tracy Evans (Date)
SIGNATURE